Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 if this an ed filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Part 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.		James First name Allen Middle name Hausotter Last name and Suffix (Sr., Jr., II, III)		Terri First name Lynn Middle name Hausotter Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5477		xxx-xx-1815				

Debtor 1 James Allen Hausotter

Debtor 2 Terri Lynn Hausotter Case number (if known)

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.		
		■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		754 NE Lillian Street Myrtle Creek, OR 97457			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Douglas County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for		Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 James Allen Hausotter Debtor 2 Terri Lynn Hausotter					Case number (if known)		
Par	Tell the Court About	our Bankrupto	y Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy					
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's about how you may pay. Typically, if you are paying the fee yourself, you may order. If your attorney is submitting your payment on your behalf, your attorney a pre-printed address.					urself, you may pay with cash, cashier's check, or m	noney	
				stallments. If you choose this option of the control of the contro	n, sign and attach the Application for Individuals to I	Pay	
		☐ I reques	t that my fee be w t required to, waive	aived (You may request this option your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty lir	ne that	
					installments). If you choose this option, you must fil ial Form 103B) and file it with your petition.	.l out	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			rict	When	Case number		
		Dis	rict		Case number		
		Dis	rict	When	Case number		
10.	Are any bankruptcy	■ No			<u>-</u>		
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Del	otor		Relationship to you		
		Dis	rict	When	Case number, if known		
		Deb	otor		Relationship to you		
		Dis	rict	When	Case number, if known		
11.	Do you rent your	■ No. Go	to line 12.				
	residence?	☐ Yes. Ha	as your landlord obt	tained an eviction judgment agains	t you and do you want to stay in your residence?		
			No. Go to line	: 12.			
			Yes. Fill out <i>II</i> bankruptcy pe		ludgment Against You (Form 101A) and file it with th	ıis	

		James Allen Hauso Terri Lynn Hausotte			Case number (if known)		
Par	t 3: R	eport About Any Bu	sinesses `	You Own as a Sole Propri	etor		
12.		ou a sole proprietor full- or part-time	■ No.	Go to Part 4.			
			☐ Yes.	Name and location of business			
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach Number, Street, City, State & ZIP Code				ate & ZIP Code		
		is petition.		Check the appropriate b	ox to describe your business:		
				☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))		
				– •	al Estate (as defined in 11 U.S.C. § 101(51B))		
					defined in 11 U.S.C. § 101(53A))		
					er (as defined in 11 U.S.C. § 101(6))		
				☐ None of the abov	/e		
13.	Chapt Bankr	ou filing under er 11 of the uptcy Code and are small business r?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate dlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of rations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 1 U.S.C. 1116(1)(B).			
	For a	definition of small	■ No.	I am not filing under Cha	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am filing under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: R	eport if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention		
14.		u own or have any	■ No.				
		rty that poses or is d to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		What is the hazard?				
				If immediate attention is needed, why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?							
	-				Number, Street, City, State & Zip Code		

			Case 17-61570-tmr7 Doc	L F	iled	05/16/17	
	tor 1 James Allen Hauso tor 2 Terri Lynn Hausotte					Case number (if known)	
Par	5: Explain Your Efforts t	o Re	ceive a Briefing About Credit Counseling				
		Abo	out Debtor 1:		Ab	out Debtor 2 (Spouse Only in a Joint Case):	
y b c	Tell the court whether you have received a briefing about credit counseling. The law requires that you	You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment		You	u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if	
	receive a briefing about credit counseling before you file for bankruptcy.		plan, if any, that you developed with the agency.			any, that you developed with the agency.	
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved credit counseling agency within the 180 days before filed this bankruptcy petition, but I do not hav a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.	
	file. If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate a payment plan, if any.	d		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.	
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiv	er		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.	
			of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.	
				Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you mustill receive a briefing within 30 days after you file You must file a certificate from the approved agency, along with a copy of the payment plan y developed, if any. If you do not do so, your case may be dismissed.			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for
				Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about			cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit
			credit counseling because of:			counseling because of:	
			Incapacity. I have a mental illness or a mental deficier that makes me incapable of realizing or making rational decisions about finances.	;y		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
			Disability. My physical disability causes me to be unable to participate in a briefing in person by phone, or through the internet, even after reasonably tried to do so.			☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
			Active duty. I am currently on active military duty in a			Active duty. I am currently on active military duty in a military	

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver

combat zone.

of credit counseling with the court.

	tor 1 James Allen Hausc tor 2 Terri Lynn Hausotte			Case	number (if known)				
Part	6: Answer These Questi	ons for Re	eporting Purposes						
16.	6. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.		•				
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe th	at are not consumer debts or l	business debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and adminis are paid that funds will be available to distribute to unsecured creditors? No						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		0,000 00,000 n100,000					
19.	How much do you estimate your assets to be worth?	□ \$100,0	001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001			00,001 - \$10 billion 000,001 - \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n	0,001 - \$1 billion 000,001 - \$10 billion ,000,001 - \$50 billion an \$50 billion			
Part	7: Sign Below								
For	you		amined this petition, and I declare u	. , , , ,	·				
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter									
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, and 3571.									
			s Allen Hausotter		nn Hausotter				
			llen Hausotter of Debtor 1	Terri Lynn Signature o	Hausotter f Debtor 2				
	Executed on May 11, 2017 Executed on May 11, 2017 MM / DD / YYYY								

Debtor 1 James Allen Hause Debtor 2 Terri Lynn Hausott		Cas	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.			wledge after an inquiry that the information in the			
, •	/s/ Matthew A. Casper OSB Signature of Attorney for Debtor	Date	May 11, 2017 MM / DD / YYYY			
	Matthew A. Casper OSB Printed name					
	OlsenDaines Firm name					
	PO Box 12829 3995 Hagers Grove Road Salem, OR 97309 Number, Street, City, State & ZIP Code					
	Contact phone (503) 362-9393	Email address				
	#062903 Bar number & State					

United States Bankruptcy Court District of Oregon

In re	James Allen Hausotter Terri Lynn Hausotter		Case No.	
		Debtor(s)	Chapter	7
	VERI	IFICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtors hereby verify th	hat the attached list of creditors is true and corre	ect to the best	of their knowledge.
Date:	May 11, 2017	/s/ James Allen Hausotter		
		James Allen Hausotter		
		Signature of Debtor		
Date:	May 11, 2017	/s/ Terri Lynn Hausotter		
		Terri Lynn Hausotter		
		Signature of Debtor		